

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>7-19-05</u>		2 Serial/Patent # <u>10-517651</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED							
<input checked="" type="checkbox"/> Filing		1	6/30/05							
<input type="checkbox"/> Amendment			\$							
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<input type="checkbox"/> Assignment			\$							
<input type="checkbox"/> Other			\$							
		7 TOTAL AMOUNT OF REFUND								
		\$ 100								
		8 TO BE REFUNDED BY:								
		Treasury Check								
		Credit Deposit A/C #:								
		9 <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">5</td> <td style="width: 20px; text-align: center;">--</td> <td style="width: 20px; text-align: center;">1</td> <td style="width: 20px; text-align: center;">3</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">3</td> </tr> </table>		0	5	--	1	3	2	3
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10 REASON:										
<input checked="" type="checkbox"/> Overpayment										
<input type="checkbox"/> Duplicate Payment										
No Fee Due (Explanation):										
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>Anita Johnson</u>		TITLE: <u>paralegal</u>								
SIGNATURE: <u>A. Johnson</u>		PHONE: <u>308-9140</u>								
OFFICE: <u>PCT</u>										
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APPROVED: _____		DATE: _____								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

U.S. No. **10/517651**

Paralegal/National Stage Division

Patent Appl. No. **EP 03/04382**

Application filed by: ☒ 30 months

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Not Published: ☐ U.S. only designed ☐ Et sequen Published: ☐ Et

INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE:

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| <input checked="" type="checkbox"/> International Application | <input type="checkbox"/> Request form PCT/RO/101 |
| <input type="checkbox"/> Article 19 Amendments | <input type="checkbox"/> PCT/ISA/110 - Search Report |
| <input type="checkbox"/> PCT/IB/J11 | <input type="checkbox"/> Search Report/References |
| <input type="checkbox"/> PCT/PEA/409 (PCT/PEA/416 on front) | <input type="checkbox"/> PCT/IB/306 - Notification of a Change |
| <input type="checkbox"/> Annexes to 409 (Article 34 Amendment) | <input type="checkbox"/> Other: _____ |
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| <input checked="" type="checkbox"/> Drawing Figure(s) - (# of dwg 2) | <input type="checkbox"/> Assignee PG Publication Notice |
| <input type="checkbox"/> Translation of Article 19 Amendments
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| <input type="checkbox"/> Application Data Sheet | <input checked="" type="checkbox"/> Oath/Declaration (executed)
<input type="checkbox"/> no charge was paid at the time of filing |
| <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Change of Address | <input type="checkbox"/> DNA Diskette <input type="checkbox"/> Sequence Listing |
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NOTES: ☐ I.A. used as Specification ☐ Other: _____

- 35 U.S.C. 371 - Receipt of Request
- Date Acceptable Oath/Declaration Received **13 Dec 04**
- Date of Completion of requirements under 35 U.S.C. 331(c)(1), (c)(2) and (c)(4) **30 Jun 05**
- Date of Completion of ALL requirements under 35 U.S.C. 371
- Date of Completion of DO/EO 983 - Notification of Acceptance
- Date of Completion of DO/EO 985 - Notification of Missing Requirements
- Date of Completion of DO/EO 916 - Notification of Defective Response
- Date of Completion of DO/EO 949 - Notification of Abandonment

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